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Mar 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000034787 (9)
1. Corporation Name
THERMAL MECHANICAL SYSTEMS, INC.



Principal Place of Business Mailing Address
1561 SO. CONGRESS AVE. UNIT #175 DELRAY BEACH FL 33445
1561 SO. CONGRESS AVE. UNIT #175 DELRAY BEACH FL 33445

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/05/1994
4. FEI Number: 65-0490105 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent: COHEN, FRED C, 712 US HWY 1, N PALM BEACH FL 33408
10. Name and Address of New Registered Agent: GLENN E. GROMANN, ESQ, 439 N.E. 7TH AVENUE, FT. LAUDERDALE FL 33301

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.
SIGNATURE: *Glenn E. Gromann* GLENN E. GROMANN DATE: 3/10/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVS LAMPARIELLO, LARRY G	1.1 TITLE	
NAME	LAMPARIELLO, LARRY G	1.2 NAME	
STREET ADDRESS	209 BERKELEY AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEWARK NJ	1.4 CITY-ST-ZIP	
TITLE	DVP LAMPARIELLO, LARRY G	2.1 TITLE	
NAME	LAMPARIELLO, LARRY G	2.2 NAME	
STREET ADDRESS	209 BERKELEY AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEWARK NJ 07107	2.4 CITY-ST-ZIP	
TITLE	DPT LAMPARIELLO, MARK	3.1 TITLE	
NAME	LAMPARIELLO, MARK	3.2 NAME	
STREET ADDRESS	51 COEYMAN AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	NUTLEY NJ	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: *Mark Lampariello* DATE: 3-12-98 561-495-4051

CFR2034 (1097)